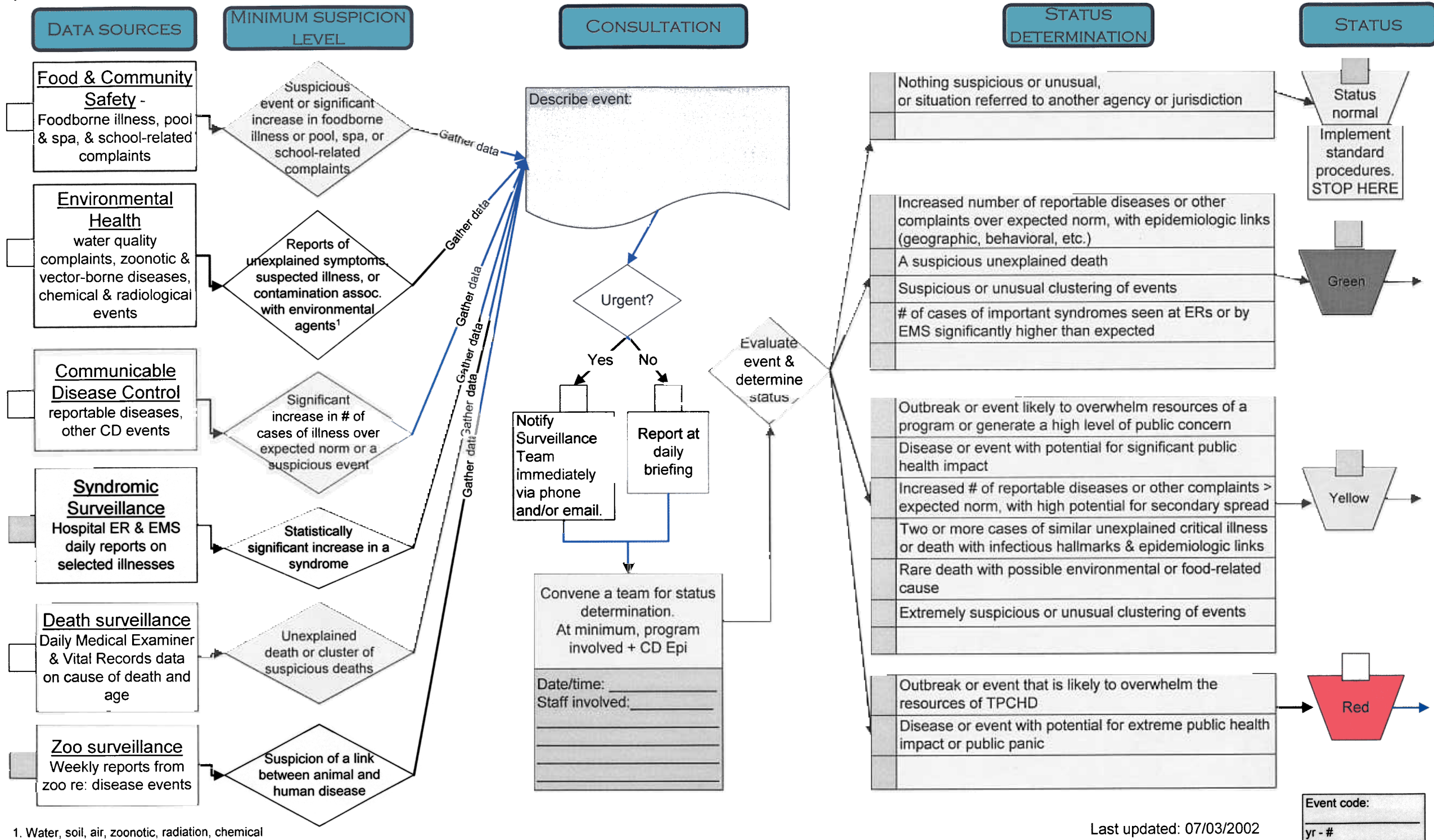


# HEALTH EVENT FLOW SHEET - STATUS DETERMINATION AND RESPONSE

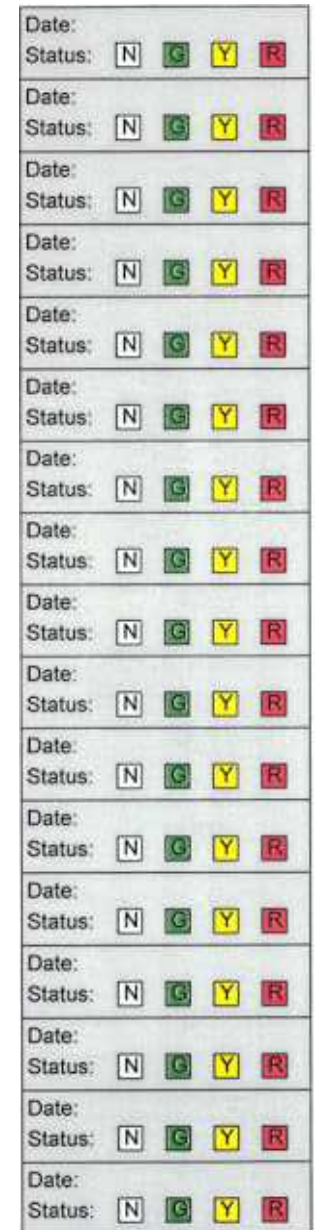
Date \_\_\_\_\_ Person initiating form \_\_\_\_\_



1. Water, soil, air, zoonotic, radiation, chemical



## DAILY STATUS REVIEW



Event code:  
\_\_\_\_\_  
yr - #